



COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name. I believe I am an original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: **DIVIDED PAINT STORAGE APPARATUS**. The specification of which was filed July 30, 2003 as U.S. Patent Application Serial Number 10/631,950. I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claim

Yes No

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Number	Country	Day/Month/Year Filed
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I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status: Patented, Pending, Abandoned
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I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Application Serial No.	Filing Date
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I hereby appoint the following as my attorneys with full power of substitution to prosecute this application and transact all business in the Patent and Trademark Office in connection therewith:

Thomas B. Haverstock	32,571	Jonathan O. Owens	37,902
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Please direct all correspondence regarding this application to the following:

Jonathan O. Owens
HAVERSTOCK & OWENS LLP
162 North Wolfe Road
Sunnyvale, California 94086
Customer Number 28960

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First/Sole Inventor: Ronald C. Elliott

Inventor's Signature: RCElliott

11/21/13
Date

Residence: 11250 Saddle Road, Monterey CA 93940

Citizenship: United States

Post Office Address: 11250 Saddle Road, Monterey CA 93940

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of MONTEREY

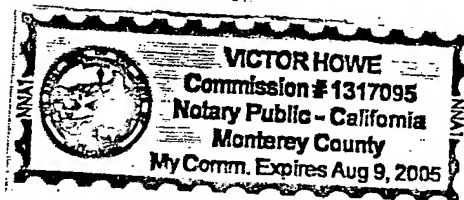
SS.

On November 21st 2003, before me, VICTOR HOWE
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared RONALD C ELLIOTT
Name(s) of Signer(s)

- ☐ personally known to me
☒ proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/het/their authorized capacity(ies), and that by his/het/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



Place Notary Seal Above

WITNESS my hand and official seal.

Signature of Notary Public

OPTIONAL

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Document Date: 11/21/03 Number of Pages: 1 PAGE

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Capacity(ies) Claimed by Signer

Signer's Name: _____

- ☐ Individual
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☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

